

Testimony for the Public Health Committee

My name is Dr. Jonathan Earle, MD. I am a board certified anatomic pathologist and molecular genetic pathologist, on staff at Hartford Hospital and Connecticut Children's Medical Center in Hartford.

I am writing to testify on **SB 857 An Act Concerning Licensure of Genetic Counselors**.

I support this bill and agree with those advocating licensure for genetic counselors.

My principal role is in diagnosis and characterization of human diseases, based on examination of tissue samples, however, I also have a role in testing for genetic aberrations in tumors, for purposes of informing treatment decisions. I am also involved in developing Hartford Healthcare's capacity to perform more extensive tumor genomic profiling, and have been instrumental in developing a screening program for Lynch syndrome in adults with colorectal carcinoma.

Genetic counselors are indispensable to our system in many ways, and it is difficult to overstate the importance of their role in managing patients with genetic diseases.

In instituting our Lynch syndrome screening program, I worked very closely with genetic counselors and other members of multidisciplinary teams. Simply stated, this program would have been impossible to achieve without the availability of expert genetic counselors, ethically and legally. Genetic counselors are highly trained individuals who possess knowledge critical to the management of patients with genetic conditions, or at risk for such conditions. These skills include: knowledge about disease transmission from generation to generation; risk assessment, knowledge of testing facilities and details of testing methodologies pertinent to interpretation, psychological impact of a diagnosis, knowledge of the re-imbursement and insurance landscape, legal and ethical frameworks for informed consent, and much more.

As we enter an era of more widespread genomic testing in both somatic tissue and germline, the knowledge and professional skills required to manage a patient in need of counseling will rise dramatically. So too, will the need for genetic counseling services, as more testing is performed and more conditions are purposefully or inadvertently discovered. This increased need cannot be overstated, as the sheer volume of genetic testing increases by orders of magnitude year over year.

I am also a member of the genitourinary tumor board and disease management teams, a member of Hartford Healthcare's research committee and protocol review committee, as well as ad hoc invitee to numerous other multidisciplinary tumor board and disease management teams. In these meetings, clinical presentations or research initiatives often have complex genetic issues, e.g. family history, occurrence of multiple cancers, etc. The presence of genetic counselors at these meetings greatly enhances the team's ability to manage these issues, as well as contributing significantly to our learning.

The role of genetic counselor in this complex age cannot simply be undertaken by anyone, even a physician or nurse, without special training. Significant harm could

occur, on an individual basis or across generations, if genetic counseling is approached casually.

Individuals with the proper training and expertise should be fully licensed to practice in the role of genetic counselor. This would have many advantages. Appropriate levels of training and expertise could be achieved and monitored for individuals offering these complex and high impact services. The scope of practice for genetic counselors could be expanded to cover gaps in healthcare delivery. The safety of patients would be enhanced by protecting them from underqualified individuals and unregulated practices.

In summary, I support the proposition of licensure for genetic counselors, to improve the health and welfare of patients.

Sincerely

Jonathan Earle, MD